| Fill in this information to identify | your case: | |
|---|---|------------------------------|
| United States Bankruptcy Court for the: DISTRICT OF MINNESOTA | | |
| Case number (if known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if thi amended fi |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|---|--------------------------------|---|
| Your full name | | |
| Write the name the government-issue identification (for your driver's licen | ed picture First Name example, | First Name |
| passport). | Middle Name | Middle Name |
| | Ebert | |
| Bring your picture identification to you | | Last Name |
| with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names | VOL | |
| have used in the years | | First Name |
| Include your marr | Middle Name | Middle Name |
| maiden names. | Last Name | Last Name |
| . Only the last 4 d | inite of | |
| your Social Secu | VVV VV | xxx - xx |
| number or federa Individual Taxpa | OK | OR |
| Identification nu | mher Qyy _ yy _ | Qvv _ vv _ |

(ITIN)

| Dei | i yier Alian Ebert | Ca | ase number (if known) |
|-----|---|--|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. | Any business names | ☐ I have not used any business names or EINs. | ☐ I have not used any business names or EINs. |
| | and Employer Identification Numbers (EIN) you have used in the last 8 years | Thiede Legacy, LLC d/b/a Thiede Manufar Business name Hermitage House, LLC | Business name |
| | | Business name | Business name |
| | Include trade names and doing business as names | Finishline Displays Business name | Business name |
| | | Forward Finish | |
| | | Business name | Business name |
| | | | |
| | | | |
| 5. | Where you live | LIN | If Debtor 2 lives at a different address: |
| | | Number Street | Number Street |
| | | Minneapolis MN 55416 City State ZIP Code Hennepin County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | City State ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address. |
| | | Number Street | Number Street |
| | | P.O. Box | P.O. Box |
| | | City State ZIP Code | City State ZIP Code |
| 6. | Why you are choosing | Check one: | Check one: |
| | this district to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | I have another reason. Explain. (See 28 U.S.C. § 1408.) | I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

| Deb | tor 1 Tyler Allan Ebert | | | | Case nun | nber (if known) | | |
|-----|---|-------------------------|---|--|--|--|--|---------------|
| P | art 2: Tell the Court A | bout | Your Bankrup | tcy Case | | | | |
| 7. | The chapter of the Bankruptcy Code you | | • | ef description of each 2010)). Also, go to the | | | C. § 342(b) for Individua | als Filing |
| | are choosing to file under | $\overline{\mathbf{V}}$ | Chapter 7 | | | | | |
| | | | Chapter 11 | | | | | |
| | | | Chapter 12 | | | | | |
| | | | Chapter 13 | | | | | |
| В. | How you will pay the fee | ☑ | court for more de pay with cash, ca | etails about how you r | nay pay. Typical ney order. If you | ly, if you are pay r attorney is subr | e clerk's office in your lo ing the fee yourself, you nitting your payment on ited address. | ı may |
| | | | | e fee in installments y The Filing Fee in In | • | | and attach the Application | n for |
| | | | By law, a judge methan 150% of the fee in installment | may, but is not require e official poverty line t | ed to, waive your hat applies to you s option, you mus | fee, and may do ur family size and st fill out the App | rou are filing for Chapter so only if your income is d you are unable to pay lication to Have the Cha | s less the |
| 9. | Have you filed for | | No | | | | | |
| | bankruptcy within the last 8 years? | | Yes. | | | | | |
| | • | Dist | rict | | When | MM / DD / YYYY | Case number | |
| | | D:-4 | | | | | | |
| | | Dist | .nct | | When | MM / DD / YYYY | Case number | |
| | | Dist | rict | | When | MM / DD / YYYY | Case number | |
| 10. | Are any bankruptcy | M | No | | | WINT DET TITT | | |
| | cases pending or being filed by a spouse who is | | Yes. | | | | | |
| | not filing this case with | Deb | | | | Relationsh | ip to you | |
| | you, or by a business partner, or by an | | | | | | Case number, | |
| | affiliate? | | | | | MM / DD / YYYY | | |
| | | Deb | otor | | | Relationsh | ip to you | |
| | | | | | | | Case number, | |
| | | | | | | MM / DD / YYYY | | |
| 11. | Do you rent your residence? | ☑ | No. Go to line Yes. Has your la | 12. landlord obtained an | eviction judgmen | t against you? | | |

and file it as part of this bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A)

 \square No. Go to line 12.

| Deb | tor 1 Tyler Allan Ebert | | | | | Case number | (if known) _ | | |
|-----|--|-------------------|-----------------------------|---|--|--|--|--|---|
| Pá | Report About Ar | ıy Bı | usine | sses You Own as | a Sole P | roprietor | | | |
| 2. | Are you a sole proprietor of any full- or part-time business? | | | Go to Part 4. Name and location of b | ousiness | | | | |
| | A sole proprietorship is a business you operate as an | | | Name of business, if any | | | | | |
| | individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | Number Street | | | | | |
| | If you have more than one sole proprietorship, use a | | | City | | | State | ZIP Co | de |
| | separate sheet and attach it | | | Check the appropriate | box to des | scribe your business | : | | |
| | to this petition. | | | Single Asset Rea Stockbroker (as | al Estate (a defined in 1 er (as defir | efined in 11 U.S.C. § s defined in 11 U.S.0 I1 U.S.C. § 101(53A ned in 11 U.S.C. § 10 | C. § 101(51E)) | 3)) | |
| 3. | Are you filing under Chapter 11 of the Bankruptcy Code, and are you a <i>small business</i> <i>debtor</i> or a debtor as defined by 11 U.S.C. | cho are mos | osing t a sma st rece | filing under Chapter 11, to proceed under Subch Il business debtor or you nt balance sheet, stater f these documents do n | napter V so u are choos nent of ope | that it can set approsing to proceed under erations, cash-flow st | priate deadla er Subchapte atement, an | ines. If you er V, you mu d federal in | i indicate that you ust attach your come tax return |
| | § 1182(1)? | $ \sqrt{} $ | No. | I am not filing under C | hapter 11. | | | | |
| | For a definition of small business debtor, see 11 U.S.C. § 101(51D). | | No. | I am filing under Chap the Bankruptcy Code. | ter 11, but | I am NOT a small bu | usiness debt | or accordin | g to the definition in |
| | | | Yes. | I am filing under Chap Bankruptcy Code, and | | | | - | |
| | | | Yes. | I am filing under Chap Bankruptcy Code, and | | - | | _ | |
| Pa | Report If You Ov | vn o | r Hav | e Any Hazardous | Property | or Any Propert | y That Ne | eds Imm | ediate Attentior |
| 4. | Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or | | No Yes. | What is the hazard? | | | | | |
| | safety? Or do you own any property that needs immediate attention? | | | If immediate attention | is needed, | why is it needed? | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | | Where is the property | ? Number | Street | | | |
| | | | | | | | | | |
| | | | | | City | | | State | ZIP Code |

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am | not | requi | red | to r | eceiv | ve a | briefing | about |
|------|-------|-------|------|------|-------|-------|----------|-------|
| cred | it co | unse | ling | bed | cause | e of: | : | |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military

duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing abou | ιt |
|--|----|
| credit counseling because of: | |

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Deb | tor 1 | Tyler Allan Ebert | | | | | Case number (if k | know | n) |
|-----|--|---|----------|-----------------------------------|---|-------------------------|--|-------|--|
| P | art 6: | Answer These Qu | uest | ions f | or Reporting Pu | rpos | ses | | |
| 16. | What ki | nd of debts do you | 16a. | | | | sumer debts? Consumer del imarily for a personal, family, o | | re defined in 11 U.S.C. § 101(8) usehold purpose." |
| | | | 16b. | mon ☑ | ey for a business or in No. Go to line 16c. Yes. Go to line 17. | nvest | iness debts? Business debts ment or through the operation e that are not consumer or bus | of th | |
| 17. | Are you | ı filing under r 7? | | No. | I am not filing under | Chap | ter 7. Go to line 18. | | |
| | any exe exclude adminis are paid availab | estimate that after empt property is ed and strative expenses d that funds will be le for distribution cured creditors? | V | Yes. | - | • | • | - | xempt property is excluded and to distribute to unsecured creditors? |
| 18. | | any creditors do imate that you | | 1-49 50-99 100-19 200-99 | | | 1,000-5,000 5,001-10,000 10,001-25,000 | | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. | | uch do you e your assets to th? | | \$100, | 0,000 01-\$100,000 001-\$500,000 001-\$1 million | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. | How m | uch do you | | \$0-\$5 | 0,000 | $\overline{\mathbf{A}}$ | \$1,000,001-\$10 million | | \$500,000,001-\$1 billion |

\$10,000,001-\$50 million

\$50,000,001-\$100 million

\$100,000,001-\$500 million

estimate your liabilities to

be?

\$50,001-\$100,000

\$100,001-\$500,000

\$500,001-\$1 million

\$1,000,000,001-\$10 billion

☐ More than \$50 billion

\$10,000,000,001-\$50 billion

Part 7:

Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| X | /s/ Tyler Allan Ebert | X |
|---|-----------------------------|-----------------------|
| | Tyler Allan Ebert, Debtor 1 | Signature of Debtor 2 |
| | Executed on 01/14/2021 | Executed on |
| | MM / DD / YYYY | MM / DD / YYYY |

| Debtor 1 T | yler Allan Ebert | | | Case number (if kn | own) | | |
|-----------------------------------|--|------------------------------|---|------------------------------|------------------|----------------------------|----|
| For your attori represented by | ney, if you are y one | eligibility to proc | or the debtor(s) named in the seed under Chapter 7, 11, 1 under each chapter for whic | 2, or 13 of title 11, United | States Co | de, and have explained th | ne |
| • | represented by ou do not need e. | | e notice required by 11 U.S e no knowledge after an in | | | | n |
| | | X /s/ Andrew Signature of | C. Walker Attorney for Debtor | Da | ate <u>01/14</u> | 4/2021 DD / YYYY | |
| | | Andrew C. | | | | | |
| | | Printed name Walker & V | e Valker Law Offices, PL | LC | | | |
| | | Firm Name 4356 Nicol | let Ave So | | | | |
| | | Number | Street | | | | |
| | | | | | | | |
| | | Minneapol | is | MN | 554 | 109 | |
| | | City | | State | ZIP | Code | |

Email address

State

Contact phone (612) 824-4357

0392525 Bar number

| Fill in this info | ormation to ident | tify your case an | d this filing: | | |
|-------------------------------------|----------------------------|---|---|--|---------------------------------------|
| Debtor 1 | Tyler | Allan | Ebert | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| | nkruptcy Court for the: | DISTRICT OF MI | NNESOTA | | |
| Case number | mapre, c. | | | Charles | |
| (if known) | | | | . – | t if this is an ded filing |
| 3.55 '-! Farms | 1004/0 | | | • | |
| Official Form | | | | | 40/41 |
| Schedule A/ | B: Property | | | | 12/15 |
| | | | • | mber (if known). Answer eve | |
| □ No. Go to | | equitable interest in a | any residence, building, lar | nd, or similar property? | |
| 1.1. Street address, if availa | able, or other description | What is the p Check all that Single-far | | Do not deduct secured clai amount of any secured cla Creditors Who Have Claim | nims on Schedule D: |
| | , | Duplex or | or multi-unit building inium or cooperative | Current value of the entire property? | Current value of the portion you own? |
| Minneapolis | MN 55416 | Manufacti | tured or mobile home | \$157,600.00 | \$157,600.00 |
| City Hennepin | State ZIP Code | Investmer | ent property re | Describe the nature of you interest (such as fee simple entireties, or a life estate | ple, tenancy by the |
| County | | Other | | Fee Simple | j, ii kii |
| Homestead at | | Who has an i Check one. | interest in the property? | 100 0111-1-1-1 | |
| Minneapolis, MN Legally describe | | Debtor 1 o | - | Check if this is comm (see instructions) | nunity property |
| | 24/27/2004 | | nation you wish to add abou | ut this item, such as local | |
| *Value from Zillo | | | | | |
| | _ | | your entries from Part 1, inc that number here | | \$157,600.00 |

| | tor 1 Tyler | Allan Ebert | Cas | se number (if known) | |
|-------------------|---|--|--|---------------------------------------|---|
| Pa | art 2: Des | cribe Your Vehicles | | | |
| - | own that someo | | e interest in any vehicles, whether they are a vehicle, also report it on Schedule G: Execute vehicles, motorcycles | _ | • |
| 3.1. | □ No ☑ Yes | | Who has an interest in the property? | Do not deduct secured clair | ms or exemptions. Put the |
| Mak | | Chrysler | Check one. | amount of any secured clai | ims on Schedule D: |
| Mod | del: | 200 | Debtor 1 only | Current value of the | |
| Yea | r: | 2011 | Debtor 2 only Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| App | roximate mileag | e: 160,000 | At least one of the debtors and another | \$3,105.00 | \$3,105.00 |
| | | 0 (approx. 160,000 | Check if this is community property (see instructions) | | |
| 4. | Examples: Box No Yes | ats, trailers, motors, person | and other recreational vehicles, other veh al watercraft, fishing vessels, snowmobiles, m | notorcycle accessories | |
| 5. | | • | own for all of your entries from Part 2, inclu Part 2. Write that number here | · · · | \$3,105.00 |
| Pa | | | | | |
| | art 3: Des | cribe Your Personal | and Household Items | | |
| | | | and Household Items Iterest in any of the following items? | • | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | you own or hav Household go Examples: Ma | | nterest in any of the following items? | • | portion you own? Do not deduct secured |
| Do y | you own or hav Household go Examples: Ma | ods and furnishings | nterest in any of the following items? | • | portion you own? Do not deduct secured |
| Do <u>y</u> 6. | Household go Examples: Ma No Yes. Desc Electronics Examples: Tel mu | ods and furnishings jor appliances, furniture, lin tribe Usual househol evisions and radios; audio, | nterest in any of the following items? ens, china, kitchenware | • | portion you own? Do not deduct secured claims or exemptions. |
| Do y | Household go Examples: Ma No Yes. Desc Electronics Examples: Tel mu | ods and furnishings jor appliances, furniture, lin tribe Usual househol evisions and radios; audio, | ens, china, kitchenware d goods and furnishings video, stereo, and digital equipment; compute evices including cell phones, cameras, media | • | portion you own? Do not deduct secured claims or exemptions. |
| Do <u>y</u> 6. | Household go Examples: Ma No Yes. Desc Electronics Examples: Tel mu No Yes. Desc Collectibles of Examples: And | ods and furnishings jor appliances, furniture, lin ribe Usual househol evisions and radios; audio, sic collections; electronic de ribe 28" TV \$200 2 PC computers Cell phone \$100 1 Laptop \$100 1 Printer \$20 f value tiques and figurines; paintin | ens, china, kitchenware d goods and furnishings video, stereo, and digital equipment; compute evices including cell phones, cameras, media | r other art objects; | portion you own? Do not deduct secured claims or exemptions. \$3,000.00 |

| Deb | tor 1 | Tyler Allan I | Ebert | Case number (if known) | |
|-----|---------------------------|-----------------------------|--|-------------------------------------|---|
| 9. | | es: Sports, ph | s and hobbies otographic, exercise, and other hobby equipment; bicycles d kayaks; carpentry tools; musical instruments | s, pool tables, golf clubs, skis; | |
| | ✓ No ☐ Yes | Describe | | |] |
| 10. | • | | es, shotguns, ammunition, and related equipment | | |
| | ✓ No ☐ Yes | . Describe | | |] |
| 11. | | | clothes, furs, leather coats, designer wear, shoes, accesso | ories | |
| | ☐ No ✓ Yes | . Describe | Ordinary wearing apparel | | \$1,000.00 |
| 12. | Jewelry Example | | iewelry, costume jewelry, engagement rings, wedding rings | s, heirloom jewelry, watches, gems, | |
| | ✓ No ☐ Yes | . Describe | | |] |
| 13. | Exampl | m animals es: Dogs, cats | s, birds, horses | | |
| | ✓ No ☐ Yes | Describe | | |] |
| 14. | Any oth | - | and household items you did not already list, including | any health aids you | |
| | | . Give specific | | |] |
| | 0 | | | | |
| 15. | | | of all of your entries from Part 3, including any entries Write the number here | | \$4,700.00 |
| Pa | art 4: | Describe | Your Financial Assets | | |
| Doy | ou own | or have any le | egal or equitable interest in any of the following? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | Cash Exampl | es: Money you petition | u have in your wallet, in your home, in a safe deposit box, | and on hand when you file your | |
| | ☐ No ☑ Yes | i | | Cash: | \$0.00 |

| Deb | otor 1 | Tyler Allan Ebert | Cas | e number (if known) | |
|--|---------------|---|---|---------------------------|--|
| 17. | • | 0, | er financial accounts; certificates of deposit; share ner similar institutions. If you have multiple accou | • | |
| | □ No ☑ Yes | i | Institution name: | | |
| | 17. | .1. Checking account: | US Bank personal checking | \$270.87 | |
| | 17. | 2. Checking account: | Nicolet National Bank business checking | \$0.00 | |
| | 17. | .3. Checking account: | Capital One personal savings - no filing | balance on date of \$0.00 | |
| | 17. | 4. Checking account: | Chase personal checking | \$447.77 | |
| | 17. | .5. Savings account: | US Bank personal savings | \$0.02 | |
| | 17. | .6. Other financial account: | Lively HSA | \$10,650.34 | |
| 18. | Example No | mutual funds, or publicly tra es: Bond funds, investment a | ccounts with brokerage firms, money market acco | unts | |
| 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture | | | | | |
| | info | s. Give specific rmation about mName of | entity: | % of ownership: | |

Thiede Legacy, LLC

Assets=

Bank Accounts (total \$64,016.28)

US Bank checking

\$34,694.94

US Bank checking

Nicolet National Bank checking #3227 \$1,874.32

\$0

Incrediblebank checking

\$27,447.02

Accounts Receivable \$10,000

Inventory \$38,250

Equipment (total \$38,794.71)

Graco ProMix (2 pumps & 2 spray guns) \$8,166.66

Spray booth \$2,858.33

Drum Agitators \$1,576.17

MEK Pump (drum) \$204.17

Make-Up Air Supply Unit \$4,573.33

2-Stage Air Compressor \$1,020.83

Stanza sprayline \$20,000

Carts (total of 98 12in racks) \$100

Basic office equipment \$166.60

Basic office furnishings \$128.62

TOTAL ASSET VALUE = \$151,060.99

Liabilities=

PineNeedle Properties (rental lease) \$1,100/mo

Advance Auto Parts \$1,793.98

Amazon \$962.02

Caster Guy \$552.78

Fastenal \$457.70

Foundation Building Materials (FBM) \$831.61

Home Depot \$10,642.89

Hydrite Chemical \$1,963.84

Menards \$4,487.65

Office Depot \$1,201.89

Town of Medford \$1,638.31

Uline \$843.60

Nicolet Bank SBA 7a loan \$588,302.27

Nicolet Bank SBA line of credit \$100,000

PPP Loan \$65,000

Note to Seller (purchase of LLC) \$300,000

Regional Devision loans \$165,000

TOTAL LIABILITIES = \$1,243,678.58 (not including rental lease)

| NET WORTH = (-)\$1,092,617.59 | 100% | \$0.00 |
|--|------|--------|
| Forward Wine, LLC - no asset LLC, has never been used or operated | 100% | \$0.00 |
| Finish Line Financial & Lensing, LLC - no asset LLC, has never been used or operated | 100% | \$0.00 |

| Deb | tor 1 | Tyler Allan Eb | ert | Case number (if known) | | | | | |
|---|---|---|--|--|-------------|--|--|--|--|
| 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. | | | | | | | | | |
| | info | s. Give specific ormation about | . Issuer name: | | | | | | |
| 21. | | ment or pension a les: Interests in IR profit-sharing | A, ERISA, Keogh, 40 | 1(k), 403(b), thrift savings accounts, or other pension or | | | | | |
| | □ No | | | | | | | | |
| | <u> </u> | s. List each count separately. | Type of account: | Institution name: | | | | | |
| | 40. | oou oopu.a.o.y. | IRA: | Edward Jones Simple IRA | \$29,165.97 | | | | |
| | | | IRA: | Vanguard ROTH IRA | \$18,003.49 | | | | |
| 22. | Your sh Examp | | deposits you have ma | ade so that you may continue service or use from a company I rent, public utilities (electric, gas, water), telecommunications | | | | | |
| 23. | No ☐ Yes | | | | | | | | |
| 24. | Interes | sts in an education | Issuer name and d n IRA, in an account 29A(b), and 529(b)(1) | in a qualified ABLE program, or under a qualified state tuition progr | am. | | | | |
| 25. | _ | S | | and description. Separately file the records of any interests. 11 U.S.C. § | 521(c) | | | | |
| | | Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit | | | | | | | |
| | | s. Give specific ormation about the | em | _ | | | | | |
| 26. | 26. Patents, copyrights, trade secrets, and other intellectual property; Examples: Internet domain names, websites, proceeds from royalties and licensing agreements | | | | | | | | |
| | | s. Give specific ormation about the | em | _ | | | | | |
| 27. | | | nd other general inta hits, exclusive licenses | ngibles s, cooperative association holdings, liquor licenses, professional licenses | 3 | | | | |
| | | s. Give specific ormation about the | em | _ | | | | | |
| | | | | | | | | | |

| Debtor 1 | | Tyler Allan Ebert | Case number (if known) | | | |
|----------|---------------|--|--|-----------------------------|------------|---|
| | • | operty owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax ref | unds owed to you | | | | |
| | □ No ✓ Yes | . Give specific information | Federal: Debtor does not anticipate U | S or MN income tax | Federal | : \$0.00 |
| | abo you | ut them, including whether already filed the returns | refunds as Debtor did not pay as muc in 2020. Amt: \$0.00 | | State: | \$1,285.00 |
| | and | the tax years | State: Estimated 2020 property tax ref \$1,285.00 | fund. Amt: | Local: | \$0.00 |
| 29. | • | | limony, spousal support, child support, mainte | nance, divorce settlement | , property | y settlement |
| | ✓ No ☐ Yes | . Give specific information | | Alimony: | | |
| | | · | | Maintenan | ice: | |
| | | | | Support: | | |
| | | | | Divorce se | ettlement: | |
| | | | | Property s | ettlemen | t: |
| 30. | Example No | | insurance payments, disability benefits, sick pecurity benefits; unpaid loans you made to sor | meone else | S' | \$2,400.00 |
| 31. | | es in insurance policies es: Health, disability, or life | insurance; health savings account (HSA); cred | dit, homeowner's, or renter | r's insura | nce |
| | com | Name the insurance npany of each policy list its value | ompany name: B | Beneficiary: | Su | rrender or refund value: |
| 32. | If you a | | e you from someone who has died trust, expect proceeds from a life insurance po someone has died | olicy, or are currently | | |
| | ✓ No ☐ Yes | . Give specific information | | | | |
| 33. | Exampl | | her or not you have filed a lawsuit or made disputes, insurance claims, or rights to sue | a demand for payment | | |
| | ✓ No ☐ Yes | . Describe each claim | | | | |
| 34. | rights to | ontingent and unliquidated o set off claims | d claims of every nature, including countere | claims of the debtor and | | |
| | ✓ No Yes | . Describe each claim | | | | |

| Deb | tor 1 Tyler A | lan Ebert | Case number (if known) | |
|-----|--------------------|--|--|---|
| 35. | Any financial as | sets you did not already list | | |
| | ☑ No | | | |
| | | ecific information | | |
| 36. | | | Part 4, including any entries for pages you have | \$62,223.46 |
| Pa | art 5: Descril | e Any Business-Related F | Property You Own or Have an Interest In. List any | real estate in Part 1 |
| 37. | Do you own or | ave any legal or equitable inter | est in any business-related property? | |
| | No. Go to P | rt 6 | | |
| | Yes. Go to I | | | |
| | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 38. | Accounts receive | able or commissions you alread | dy earned | |
| | □ No ✓ Yes. Descri | e Forward Finish d/b/a Fin | ishline Displays has no current accounts receivable | \$0.00 |
| | • | | | |
| 39. | Examples: Busin | t, furnishings, and supplies ess-related computers, software, , chairs, electronic devices | modems, printers, copiers, fax machines, rugs, telephones, | |
| | ☑ No | | | 1 |
| | Yes. Descri | e | | |
| 40. | Machinery, fixtu | es, equipment, supplies you us | se in business, and tools of your trade | |
| | □ No | Serverd Finish d/h/a Fin | ichline Dienleye | \$8,468.00 |
| | Y res. Descri | e Forward Finish d/b/a Fin | isnime displays | \$0,400.00 |
| | | Equipment= | A 4.440 | |
| | | 2017 75 HP C-Aire air co 2012 Paintmate mixer \$1 | • | |
| | | 2017 Dewalt chop saw \$ | 500 | |
| | | Various worktables \$1,5 Ordinary handtools, scra | | |
| 41. | Inventory | | | |
| | □ No | | | _ |
| | Yes. Descri | e Forward Finish d/b/a Fin | ishline Displays has no current inventory | \$0.00 |
| 42. | Interests in part | nerships or joint ventures | | • |
| | ✓ No ✓ Yes. Descri | e Name of entity: | % of ownership: | |
| 43. | _ | nailing lists, or other compilation | · | |
| | | 3 | | |
| | <u></u> | r lists include personally identi | fiable information (as defined in 11 U.S.C. § 101(41A))? | |
| | | 5 " | | 1 |
| | ☐ Ye | s. Describe | | |

| Deb | tor 1 | Tyler Allan Ebert Case number (if known) | |
|-----|---------------|--|---|
| 44. | Any bu | siness-related property you did not already list | |
| | ✓ No | s. Give specific information. | |
| 45. | Add the | e dollar value of all of your entries from Part 5, including any entries for pages you have d for Part 5. Write that number here | . → \$8,468.00 |
| Pa | | Describe Any Farm- and Commercial Fishing-Related Property You Own or Ha If you own or have an interest in farmland, list it in Part 1. | ve an Interest In. |
| 46. | Do you | own or have any legal or equitable interest in any farm- or commercial fishing-related property? | |
| | | Go to Part 7. Go to line 47. | |
| | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 47. | Farm a | nimals es: Livestock, poultry, farm-raised fish | |
| | ✓ No | | |
| | ☐ Yes | S | |
| 48. | Crops- | either growing or harvested | |
| | | s. Give specific | |
| 49. | Farm a | nd fishing equipment, implements, machinery, fixtures, and tools of trade | |
| | ✓ No ☐ Yes | i | |
| 50. | Farm a | nd fishing supplies, chemicals, and feed | |
| | ☑ No | | |
| | ☐ Yes | 5 | |
| 51. | Any far | m- and commercial fishing-related property you did not already list | |
| | _ | s. Give specific | |
| 52. | | e dollar value of all of your entries from Part 6, including any entries for pages you have | \$0.00 |
| | attache | d for Part 6. Write that number here | ·· 7 [|

| Deb | otor 1 Tyler Allan Ebert | Case number (if known) | | |
|-----|--|--------------------------------------|-------|--------------|
| Р | art 7: Describe All Property You Own or Have a | an Interest in That You Did Not List | Above | • |
| 53. | Do you have other property of any kind you did not alread Examples: Season tickets, country club membership | dy list? | | |
| | NoYes. Give specific information. | | | |
| 54. | Add the dollar value of all of your entries from Part 7. Wr | ite that number here | → | \$0.00 |
| Ρ | art 8: List the Totals of Each Part of this Form | | | |
| 55. | Part 1: Total real estate, line 2 | | → | \$157,600.00 |
| 56. | Part 2: Total vehicles, line 5 | \$3,105.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$4,700.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$62,223.46 | | |
| 59. | Part 5: Total business-related property, line 45 | \$8,468.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |

\$0.00

\$78,496.46

Copy personal property total

\$78,496.46

\$236,096.46

61. Part 7: Total other property not listed, line 54

62. Total personal property. Add lines 56 through 61.....

63. Total of all property on Schedule A/B. Add line 55 + line 62.....

| Fill in this in | formation to | identify your | case: | | | |
|---|--|---|---|----------------------------------|--|--|
| Debtor 1 | Tyler First Name | Allan Middle Name | Ebert Last Name | | | |
| Debtor 2 (Spouse, if filing | 1) First Name | Middle Name | e Last Name | | | |
| | | | OF MINNESOTA | | | ☐ Check if this is an |
| Case number (if known) | - | | | | | amended filing |
| Official Forn | n 106C | | | | | |
| Schedule C | : The Prop | erty You Cl | aim as Exemp | ot | | 04 |
| Using the propert | y you listed on So fill out and attach | chedule A/B: Prope to this page as m | erty (Official Form 106 | 6A/B) | as your source, list the | esponsible for supplying correct informat e property that you claim as exempt. If r ssary. On the top of any additional page |
| is to state a spece exempted up to to receive certain be exemption of 100 property is deter | cific dollar amou the amount of ar lenefits, and tax- 10% of fair marker mined to exceed | nt as exempt. All ny applicable stat exempt retirement t value under a la d that amount, yo | ternatively, you may utory limit. Some ex nt fundsmay be unl w that limits the exe ur exemption would | clain cempt imite mptic | n the full fair market v tionssuch as those d in dollar amount. F | you claim. One way of doing so value of the property being for health aids, rights to dowever, if you claim an ar amount and the value of the le statutory amount. |
| Part 1: Id | entify the Pro | perty You Cla | im as Exempt | | | |
| | f exemptions are | - | | | if your spouse is filing | with you. |
| - | | nd federal nonban exemptions. 11 U | kruptcy exemptions. J.S.C. § 522(b)(2) | 11 U. | S.C. § 522(b)(3) | |
| _ | | - | | npt. fi | ill in the information | below. |
| Brief description | of the property at lists this prop | and line on | Current value of the portion you own | Amo | ount of the mption you claim | Specific laws that allow exemption |
| | | | Copy the value from Schedule A/B | | ck only one box for n exemption | |
| Brief description: | | | \$157,600.00 | | \$55,572.54 | Minn. Stat. §§ 510.01, 510.02, |
| Homestead at Minneapolis, M Legally describ | | | | | 100% of fair market value, up to any applicable statutory limit | 510.07 |
| | | | | | | |
| Walua fram Zil | low 04/07/2024 | | | | | |
| ine from Schedu | low 01/07/2021 lle A/B: 1.1 | _ | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | more than \$170,350? ears after that for cas | | ed on or after the date | of adjustment.) |
| ✓ No | | | | | | |

| Part 2: Additional Page | | | | |
|--|--------------------------------------|---------------------------------------|---|------------------------------------|
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | | ount of the mption you claim | Specific laws that allow exemption |
| | Copy the value from Schedule A/B | Check only one box for each exemption | | |
| Brief description: 2011 Chrysler 200 (approx. 160,000 miles) *Value from KBB 12/17/2020 Line from Schedule A/B:3.1 | \$3,105.00 | | \$3,105.00 100% of fair market value, up to any applicable statutory limit | Minn. Stat. § 550.37(12)(a) |
| Brief description: Usual household goods and furnishings Line from <i>Schedule A/B</i> : 6 | \$3,000.00 | | \$3,000.00 100% of fair market value, up to any applicable statutory limit | Minn. Stat. § 550.37(4)(b) |
| Brief description: 28" TV \$200 2 PC computers \$200 total Cell phone \$100 1 Laptop \$100 1 Printer \$20 Line from Schedule A/B:7 | \$700.00 | | \$300.00 100% of fair market value, up to any applicable statutory limit | Minn. Stat. § 550.37(4)(b) |
| Brief description: Ordinary wearing apparel Line from Schedule A/B:11 | \$1,000.00 | | \$1,000.00 100% of fair market value, up to any applicable statutory limit | Minn. Stat. § 550.37(4)(a) |
| Brief description: Lively HSA Line from Schedule A/B:17.6 | \$10,650.34 | | \$10,650.34 100% of fair market value, up to any applicable statutory limit | Minn. Stat. § 550.37(26) |
| Brief description: Edward Jones Simple IRA (1st exemption claimed for this asset) Line from Schedule A/B:21 | \$29,165.97 | | \$29,165.97 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(b)(3)(C) |
| Brief description: Edward Jones Simple IRA (2nd exemption claimed for this asset) Line from Schedule A/B:21 | \$29,165.97 | | \$0.00 100% of fair market value, up to any applicable statutory limit | Minn. Stat. § 550.37(24) |
| Brief description: Vanguard ROTH IRA (1st exemption claimed for this asset) Line from Schedule A/B:21 | \$18,003.49 | | \$18,003.49 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(b)(3)(C) |

| Debtor 1 Tyler Allan Ebert | | Case number | Case number (if known) | | |
|---|--|---|--|--|--|
| Part 2: Additional Page | | | | | |
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption | | |
| | Copy the value from Schedule A/B | Check only one box for each exemption | | | |
| Brief description: Vanguard ROTH IRA (2nd exemption claimed for this asset) Line from Schedule A/B:21 | \$18,003.49 | \$0.00 100% of fair market value, up to any applicable statutory limit | Minn. Stat. § 550.37(24) | | |
| Brief description: Estimated earned unpaid wages - net Line from <i>Schedule A/B</i> : | \$2,400.00 | \$1,800.00 100% of fair market value, up to any applicable statutory limit | Min. Stat. § 571.921, 922, 550.37 (13) | | |
| Brief description: Forward Finish d/b/a Finishline Displays Equipment= 2017 75 HP C-Aire air compressor \$1,143 2012 Paintmate mixer \$1,700 2017 Dewalt chop saw \$500 Various worktables \$1,500 Ordinary handtools, scrap, saw, etc. \$3,625 Line from Schedule A/B: 40 | \$8,468.00 | \$8,468.00 100% of fair market value, up to any applicable statutory limit | Minn. Stat. § 550.37(6)(7) | | |

\$0.00

abla

\$0.00

100% of fair market

applicable statutory

value, up to any

limit

Minn. Stat. § 550.37(6)(7)

Brief description:

has no current inventory

Line from Schedule A/B: 41

Forward Finish d/b/a Finishline Displays

| EU to dita to C | | | | | | |
|--|--|--|---|--|---|-----------------------------------|
| Debtor 1 | Tyler | lentify your case Allan | Ebert | | | |
| Debtor 1 | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | — | | |
| United States Bar | nkruptcy Court for | the: DISTRICT OF | MINNESOTA | | | |
| Case number | | | | | Chook if this is | 2.00 |
| (if known) | | | | | Check if this is amended filing | |
| Official Form | 106D | | | | | |
| Schedule D: | Creditors \ | Who Have Cla | ims Secured I | by Property | | 12/15 |
| Correct informatio On the top of any a | n. If more space additional pages ors have claims | is needed, copy the , write your name an secured by your pro | Additional Page, fill d case number (if kn perty? | · | es, and attach it to thi | s form. |
| ш | ck this box and su in all of the inform | | ourt with your other so | chedules. You have noth | ning else to report on th | is form. |
| Part 1: Lis | t All Secured | Claims | | | | |
| 2. List all secure | ed claims. If a cr | editor has more than o | one secured | | | |
| claim, list the c | creditor separately particular claim, li ible, list the claims | / for each claim. If mo st the other creditors i s in alphabetical order | ore than one n Part 2. As | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 | | Describe the secures the | property that claim: | \$588,302.27 | \$0.00 | \$588,302.27 |
| Nicolet National Creditor's name | Bank | —— Thiede Leg | acy, LLC | | | |
| 111 N Washington | on St | | | | | |
| | | As of the dat | • | is: Check all that apply. | | |
| Green Bay City | WI 54301 State ZIP Code | Unliquida | ted | | | |
| Who owes the deb | ot? Check one. | ш . | n. Check all that appl | y. | | |
| Debtor 1 only Debtor 2 only | | _ | | as mortgage or secured | car loan) | |
| Debtor 1 and D | | ☐ Judgmen | lien (such as tax lien, t lien from a lawsuit | mechanic's lien) | | |
| _ | the debtors and a | nother 🔽 Other (inc | cluding a right to offse | t) | | |
| Check if this c | | Busines | ss debt | | | |
| Date debt was inc | urred | Last 4 digits | of account number | <u>5 8 7 0</u> | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$588,302.27

| Debtor 1 Tyler Allan Ebert | | _ Case number (if | known) | |
|--|--|--|---|-----------------------------------|
| Part 1: Additional Page After listing any entries or sequentially from the prev | | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.2 Nicolet National Bank Creditor's name 111 N Washington St Number Street | Describe the property that secures the claim: Thiede Legacy, LLC | \$100,000.00 | \$0.00 | \$100,000.00 |
| Green Bay WI 54301 City State ZIP Code Who owes the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and anothe ☐ Check if this claim relates to a community debt Date debt was incurred | Business debt | mortgage or secured echanic's lien) | car loan) | |
| 2.3 Northpoint Bank Creditor's name | Describe the property that secures the claim: Homestead at | <u>7 0 0 2</u> <u>\$102,027.46</u> | \$157,600.00 | |
| Number Street Loan Servicing, Suite 320 | As of the date you file, the claim is: | Check all that apply. | | |
| Grand Rapids MI 49546 City State ZIP Code Who owes the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe Check if this claim relates to a community debt | Contingent Unliquidated Disputed Nature of lien. Check all that apply. ✓ An agreement you made (such as Statutory lien (such as tax lien, module of the continuous) Judgment lien from a lawsuit ✓ Other (including a right to offset) Mortgage | | car loan) | |
| Date debt was incurred | Last 4 digits of account number | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$202,027.46

| Northwest Regional Planning Commi Creditor's name 1400 South River St Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that | Debtor 1 Tyler Allan Ebert | | Case number (if | known) | |
|--|--|---|-----------------------------------|--|-------------------|
| Spooner Wi 54801 State ZiP Code Debtor 1 and Debtor 2 and monthing debt Date debt was incurred Last 4 digits of account number Surines seeing the date you file, the claim is: Check all that apply. Size ZiP Code Debtor 1 only Debtor 1 and Debtor 2 shows the debt? State ZiP Code Disputed Disputed Disputed Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 3 and another Disputed Disputed Disputed Disputed Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only Debtor 3 and Debtor 3 and another Debtor 4 and Debtor 3 and another Debtor 4 and Debtor 5 and another Debtor 5 and 3 another Debtor 6 and 3 another Debtor 8 and 3 another Debtor 8 and 3 another Debtor 9 another 9 anothe | Part 1: After listing any entries on | | Amount of claim Do not deduct the | Value of collateral that supports this | Unsecured portion |
| Contingent | Northwest Regional Planning Commi Creditor's name 1400 South River St | secures the claim: | \$20,000.00 | \$0.00 | \$20,000.00 |
| Describe the property that secures the claim: Northwest WI Business Development Creditor's name 1400 South River St Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Business debt | City State ZIP Code Who owes the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt | ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☑ An agreement you made (such as ☐ Statutory lien (such as tax lien, med ☐ Judgment lien from a lawsuit ☑ Other (including a right to offset) | mortgage or secured | car loan) | |
| Spooner Wi 54801 City State ZIP Code Disputed Who owes the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another At least one of the debtors and another Check if this claim relates ✓ Contingent Unliquidated Disputed Nature of lien. Check all that apply. ✓ An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit ✓ Other (including a right to offset) Business debt | 2.5 Northwest WI Business Development Creditor's name 1400 South River St | Describe the property that secures the claim: | \$70,000.00 | \$0.00 | \$70,000.00 |
| Date debt was incurred Last 4 digits of account number | City State ZIP Code Who owes the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt | Contingent Unliquidated Disputed Nature of lien. Check all that apply. ✓ An agreement you made (such as Statutory lien (such as tax lien, me Judgment lien from a lawsuit ✓ Other (including a right to offset) Business debt | mortgage or secured | car loan) | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$90,000.00

| Debtor 1 | Tyler Allan Ebert | Case number (if known) | | | |
|---|---|--|--|---|-----------------------------------|
| Part 1: | Additional Page After listing any entries on this page, number them sequentially from the previous page. | | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.6 WI Business Innovation Corp. Creditor's name 1400 South River St Number Street | | Describe the property that secures the claim: Thiede Legacy, LLC | \$70,000.00 | \$0.00 | \$70,000.00 |
| Debtor Debtor Debtor At least Check | • | As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, me Judgment lien from a lawsuit Other (including a right to offset) Business debt | mortgage or secured | l car loan) | |

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

\$70,000.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$950,329.73

Date debt was incurred

| Fill in this inf | armatian to i | lontify your | | I | | |
|---|---|--|--|-------------------------|-----------------------------------|--------------------|
| | ormation to i | | | | | |
| Debtor 1 | Tyler First Name | Allan Middle Name | Ebert Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Ba | nkruptcy Court for | the: DISTRICT | OF MINNESOTA | | | |
| Case number (if known) | | | | | Check if this is a amended filing | חג |
| Official Form | 106E/F | | | | | |
| Schedule E/ | /F: Creditor | s Who Hav | e Unsecured Claims | | | 12/15 |
| Do not include an If more space is n to this page. On t | y creditors with leeded, copy the the top of any ad | partially secured Part you need, t ditional pages, v | and on Schedule G: Executory Co d claims that are listed in Schedule fill it out, number the entries in the vrite your name and case number (secured Claims | D: Creditors Who H | old Claims Secur | ed by Property. |
| 1. Do any credit | tors have priority | unsecured clai | ms against you? | | | |
| claim. For ea | ur priority unsect | entify what type o | creditor has more than one priority unificial claim it is. If a claim has both prior much as possible, list the claims in al | ity and nonpriority ame | ounts, list that clair | m here and |
| | needed for priori other creditors in | | ms, fill out the Continuation Page of | Part 1. If more than o | ne creditor holds a | ı particular |
| (For an explar | nation of each typ | e of claim, see th | e instructions for this form in the inst | ruction booklet. | | |
| | | | | Total claim | Priority amount | Nonpriority amount |
| 2.1 | | | | \$0.00 | \$0.00 | \$0.00 |
| Internal Revenu | | | - Last 4 digits of account number | | | |
| Priority Creditor's Nam PO Box 7346 | ne | | When was the debt incurred? | | | |
| Number Street | | | | | - | |
| | | | - As of the date you file, the claim ☐ Contingent | is: Check all that app | oly. | |
| Philadelphia Philadelphia | PA | 19101-7346 | Unliquidated | | | |
| City | State | ZIP Code | - Disputed | | | |
| Who incurred the | debt? Check of | ne. | Type of PRIORITY unsecured cla | im: | | |
| Debtor 1 only Debtor 2 only | | | ☐ Domestic support obligations ☐ Taxes and certain other debts | you awa tha gayaram | ont | |
| Debtor 1 and D | • | | ✓ Taxes and certain other debts✓ Claims for death or personal ir | • | ent | |
| <u> </u> | the debtors and a | | intoxicated | - | | |
| ☐ Check if this o | claim is for a con | imunity debt | Other. Specify | | | |
| No Yes | or to onser! | | | | | |

Debtor 1 Tyler Allan Ebert Case number (if known) Part 1: Your PRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim Priority** Nonpriority amount amount previous page. 2.2 \$0.00 \$0.00 \$0.00 Minnesota Department of Revenue Last 4 digits of account number Priority Creditor's Name 551 Bkcy Section When was the debt incurred? PO Box 64447 As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Unliquida
Disputed St Paul MN 55164 City State ZIP Code Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only ☐ Domestic support obligations Debtor 2 only Taxes and certain other debts you owe the government Debtor 1 and Debtor 2 only Claims for death or personal injury while you were At least one of the debtors and another intoxicated ☐ Check if this claim is for a community debt Other. Specify Is the claim subject to offset? ✓ No ☐ Yes 2.3 \$0.00 \$0.00 \$0.00 Wisconsin Department of Revenue Last 4 digits of account number Priority Creditor's Name PO Box 8906 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated WI Madison 53708 Disputed State ZIP Code Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only ☐ Domestic support obligations Debtor 2 only Taxes and certain other debts you owe the government Debtor 1 and Debtor 2 only Claims for death or personal injury while you were

intoxicated

Other. Specify

Official Form 106E/F

At least one of the debtors and another

Is the claim subject to offset?

No Yes

☐ Check if this claim is for a community debt

| Debtor 1 Tyler Allan Ebert | Case number (if known) |
|---|--|
| Part 2: List All of Your NONPRIORIT | Y Unsecured Claims |
| Yes 4. List all of your nonpriority unsecured claims If a creditor has more than one nonpriority unsecured type of claim it is. Do not list claims already incl | claims against you? Submit this form to the court with your other schedules. in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, identify what luded in Part 1. If more than one creditor holds a particular claim, list the other creditors in unsecured claims, fill out the Continuation Page of Part 2. Total claim |
| Advanced Auto Parts Nonpriority Creditor's Name 302 S 5th St Number Street Medford WI 54451 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt sthe claim subject to offset? No Yes | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Business debt |
| Amazon/Synchrony Bank Nonpriority Creditor's Name Attn Bankrutpcy Dept Number Street PO Box 103104 Roswell GA 30076 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Business debt |

| Debtor 1 Tyler Allan Ebert | Case number (if known) | |
|---|---|-------------|
| Part 2: Your NONPRIORITY Unsect | ured Claims Continuation Page | |
| After listing any entries on this page, number th previous page. | em sequentially from the | Total claim |
| 4.3 | | \$17,996.91 |
| Capital One Bankruptcy | Last 4 digits of account number 4 7 4 4 | · , |
| Nonpriority Creditor's Name PO Box 30253 | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| Salt Lake City UT 84130 3285 | ☐ Contingent ☐ Unliquidated | |
| | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | ☐ Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | ✓ Other. Specify | |
| Check if this claim is for a community debt | Consumer debt | |
| Is the claim subject to offset? No | | |
| Yes | | |
| 4.4 | | \$20,000,00 |
| Medford Area Development Foundation | Last 4 digits of account number | \$30,000.00 |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| PO Box 172 Number Street | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| | ☐ Unliquidated ☐ Disputed | |
| Medford WI 54451 | | |
| City State ZIP Code Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| Check if this claim is for a community debt | Other. Specify Business debt | |
| Is the claim subject to offset? | | |
| No You | | |
| Yes | | |
| 4.5 | | \$4,422.85 |
| Menards/Capital One | Last 4 digits of account number 9 8 3 9 | |
| Nonpriority Creditor's Name PO Box 30257 | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | ☐ Contingent ☐ Unliquidated | |
| Salt Lake City UT 84130 | Disputed | |
| Salt Lake City UT 84130 City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| Check if this claim is for a community debt | Business debt | |
| Is the claim subject to offset? No | | |
| ☑ No □ Yes | | |

| Debtor 1 Tyler Allan Ebert | Case number (if known) | |
|---|---|-------------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | m sequentially from the | Total claim |
| 4.6 | | \$65,000.00 |
| Nicolet National Bank | Last 4 digits of account number | |
| Nonpriority Creditor's Name SBA Paycheck Protection Program Loan | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| 111 N Washington St | ☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent | |
| Green Bav WI 54301 | Disputed | |
| Green Bay WI 54301 City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. ☐ Debtor 1 only | Student loans | |
| ☑ Debtor 1 only ☐ Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | ☑ Other. Specify | |
| Check if this claim is for a community debt | Business debt | |
| Is the claim subject to offset? ☑ No | | |
| Yes | | |
| 4.7 | | A 4 000 00 |
| Office Depot | Last 4 digits of account number | \$1,202.89 |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| PO Box 653054 Number Street | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| | ☐ Unliquidated ☐ ☐ Disputed | |
| Dallas TX 75265 | | |
| City State ZIP Code Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| ☑ Debtor 1 only | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only | that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Check if this claim is for a community debt | ✓ Other. Specify Business debt | |
| Is the claim subject to offset? | | |
| No Variable No | | |
| Yes | | |
| 4.8 | | \$10,522.20 |
| Sams Club/Synchrony Bank | Last 4 digits of account number 4 4 0 5 | |
| Nonpriority Creditor's Name Attn: Bankruptcy Dept | When was the debt incurred? | |
| Number Street PO Box 965060 | As of the date you file, the claim is: Check all that apply. | |
| FO BOX 903000 | ☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent | |
| O-lands El 22000 5000 | Disputed | |
| Orlando FL 32896-5060 City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| Check if this claim is for a community debt | Consumer debt | |
| Is the claim subject to offset? | | |
| ☑ No □ Yes | | |

| Debtor 1 Tyler Allan | Ebert | Case number (if known) | |
|---|---------------------------------|--|--------------|
| Part 2: Your NO | NPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries of previous page. | on this page, number the | m sequentially from the | Total claim |
| 4.9 | | | \$484.81 |
| The Home Depot/CBN | A | Last 4 digits of account number 3 2 7 0 | |
| Nonpriority Creditor's Name PO Box 6497 | | When was the debt incurred? | |
| Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | | ☐ Contingent 		☐ Unliquidated | |
| 01 F -II- | AD 57447.0407 | Disputed | |
| Sioux Falls City | SD 57117-6497 State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? | Check one. | Student loans | |
| Debtor 1 only Debtor 2 only | | Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 | only | that you did not report as priority claims | |
| At least one of the deb | • | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| ı – | for a community debt | Other. Specify Business debt | |
| Is the claim subject to of | fset? | 245 | |
| ☑ No | | | |
| ☐ Yes | | | |
| 4.10 | | | \$300,000.00 |
| | | Last 4 digits of account number | \$300,000.00 |
| Nonpriority Creditor's Name | | When was the debt incurred? | |
| Number Street | | As of the date you file, the claim is: Check all that apply. | |
| Number Succi | | _ Contingent | |
| | | Unliquidated | |
| Medord | WI 54451 | ■ Disputed | |
| City | State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? | Check one. | ☐ Student loans | |
| Debtor 1 only Debtor 2 only | | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 | only | that you did not report as priority claims | |
| At least one of the deb | | Debts to pension or profit-sharing plans, and other similar debts | |
| – | for a community debt | ✓ Other. Specify Business debt | |
| Is the claim subject to of | - | _ 45/11000 4001 | |
| ✓ No | | | |
| Yes | | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | | Total claim |
|--------------------------|-----|---|--------------|--------------|
| Total claims from Part 1 | 6a. | Domestic support obligations | 6a. | \$0.00 |
| | 6b. | Taxes and certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. _ | ÷\$0.00 |
| | 6e. | Total. Add lines 6a through 6d. | 6d. | \$0.00 |
| | | | | Total claim |
| Total claims from Part 2 | 6f. | Student loans | 6f. | \$0.00 |
| | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. - | \$432,385.66 |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$432,385.66 |

| Fill in this inf | ormation to i | identify your case: | | | |
|---------------------|---------------------|---|-------------------------|---|----------|
| Debtor 1 | Tyler | Allan | Ebert | | |
| Debior 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Ba | nkruptcy Court fo | or the: DISTRICT OF I | MINNESOTA | | |
| Case number | | | | ☐ Check if this is an | |
| (if known) | | | | amended filing | |
| Official Form | 1066 | | | | |
| | | _ | | | |
| Schedule G | : Executor | y Contracts and | d Unexpired L | eases | 12/15 |
| . , | . 0 | es, write your name and contracts or unexpired | ` | own). | |
| ☐ No. Che | ck this box and f | file this form with the cou | urt with your other sch | edules. You have nothing else to report on this form. | |
| Yes. Fill | in all of the infor | mation below even if the | e contracts or leases | are listed on Schedule A/B: Property (Official Form 106A/B) |)- |
| is for (for exa | | icle lease, cell phone). | • | ract or lease. Then state what each contract or lease for this form in the instruction booklet for more examples of | : |
| Person or | company with | whom you have the co | ntract or lease | State what the contract or lease is for | |
| PineNeed Name | dle Properties | , LLC | | Thiede Legacy, LLC rental lease Contract to be REJECTED | |
| | | | | | |

WI State **54451**ZIP Code

Medford City

| Fill in this inf | formation to | identify your case | : | | |
|--|--|--|--|---|-------|
| Debtor 1 | Tyler | Allan | Ebert | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Ba | inkruptcy Court fo | or the: DISTRICT OF | MINNESOTA | | |
| | | | | | |
| Case number (if known) | | | | Check if this is an amended filing | |
| Official Form | | | | | |
| Schedule H | : Your Cod | ebtors | | | 12/15 |
| two married peop needed, copy the page. On the top | ole are filing toge Additional Page | ether, both are equally e, fill it out, and numbe al Pages, write your n | r responsible for suppler the entries in the bo ame and case number | ave. Be as complete and accurate as possible. If ying correct information. If more space is xes on the left. Attach the Additional Page to this (if known). Answer every question. er spouse as a codebtor.) | |
| | • | • | • • • • | erritory? (Community property states and territories ico, Texas, Washington, and Wisconsin.) | |
| LV. | | rmer spouse, or legal e | quivalent live with you a | it the time? | |
| person show creditor on S | n in line 2 agair Schedule D (Offi | n as a codebtor only if | that person is a guara edule E/F (Official Form | codebtor if your spouse is filing with you. List the ntor or cosigner. Make sure you have listed the 106E/F), or <i>Schedule G</i> (Official Form 106G). Use | |

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

| Fill in this information t | o identify your case: | | | |
|---|---|--|--------------------------------------|--|
| Debtor 1 Tyler | Allan | Ebert | | |
| First Nar | me Middle Name | Last Name | Che | eck if this is: |
| Debtor 2 (Spouse, if filing) First Nar | ne Middle Name | Last Name | - | An amended filing |
| United States Bankruptcy Co | urt for the: DISTRICT O | F MINNESOTA | | A supplement showing postpetition |
| Case number | | | | chapter 13 income as of the following date: |
| (if known) | | | | MM / DD / YYYY |
| Official Form 106l Schedule I: Your Inc | omo | | | 42/45 |
| Schedule I: Your inc | ome | | | 12/15 |
| Be as complete and accurate a responsible for supplying corrinclude information about your about your spouse. If more sp your name and case number (i | ect information. If you are r spouse. If you are separ ace is needed, attach a se f known). Answer every o | e married and not filing jo rated and your spouse is a eparate sheet to this form. | intly, and your not filing with y | spouse is living with you, ou, do not include information |
| Fill in your employment information. | | | | |
| If you have more than one | | Debtor 1 | | Debtor 2 or non-filing spouse |
| job, attach a separate page with information about | Employment status | ✓ Employed☐ Not employed | | ☐ Employed☐ Not employed |
| additional employers. | Occupation | Self-Employed | | |
| Include part-time, seasonal or self-employed work. | · | Thiede Legacy, LLC | | _ |
| Occupation may include | Employer's address | | | |
| student or homemaker, if it applies. | | Number Street | | Number Street |
| | | | | |
| | | | | |
| | | City | tate Zip Code | City State Zip Code |
| | How long employed to | here? October 2019 | | |
| Part 2: Give Details A | About Monthly Incom | e | | |
| Estimate monthly income as or non-filing spouse unless you are | _ | m. If you have nothing to re | port for any line | e, write \$0 in the space. Include your |
| If you or your non-filing spouse h you need more space, attach a s | | er, combine the information | for all employe | rs for that person on the lines below. If |
| | | F - | or Debtor 1 | For Debtor 2 or non-filing spouse |
| List monthly gross wages payroll deductions). If not p would be. | | | \$6,667.00 | <u> </u> |
| 3. Estimate and list monthly | overtime pay. | 3. + | \$0.00 | |
| 4. Calculate gross income. | Add line 2 + line 3. | 4. | \$6,667.00 | |

| Deb | otor 1 Tyler Allan Ebert | | Case nui | mber (if know | n) | |
|-----|--|--------------|-------------|---------------|------------|-------------------------|
| | | F | or Debtor 1 | For Debto | | |
| | Copy line 4 here | → 4. | \$6,667.00 | | | |
| 5. | List all payroll deductions: | | | | | |
| | 5a. Tax, Medicare, and Social Security deductions | 5a. | \$1,467.00 | | | |
| | 5b. Mandatory contributions for retirement plans | 5b. | \$0.00 | | | |
| | 5c. Voluntary contributions for retirement plans | 5c. | \$0.00 | | | |
| | 5d. Required repayments of retirement fund loans | 5d. | \$0.00 | | | |
| | 5e. Insurance | 5e. | \$0.00 | | | |
| | 5f. Domestic support obligations | 5f. | \$0.00 | | | |
| | 5g. Union dues | 5g. | \$0.00 | | | |
| | 5h. Other deductions. Specify: | 5h. + | \$0.00 | | | |
| 6. | Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$. | + 6. | \$1,467.00 | | | |
| 7. | Calculate total monthly take-home pay. Subtract line 6 from line 4 | 1. 7. | \$5,200.00 | - | | |
| 8. | List all other income regularly received: | | | | | |
| | 8a. Net income from rental property and from operating a business, profession, or farm | 8a. | \$400.00 | | | |
| | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | | | | | |
| | 8b. Interest and dividends | 8b. | \$0.00 | | | |
| | 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive | 8c. | \$0.00 | | | |
| | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | | | | |
| | 8d. Unemployment compensation | 8d. | \$0.00 | | | |
| | 8e. Social Security | 8e. | \$0.00 | | | |
| | 8f. Other government assistance that you regularly receive | | * | - | | |
| | Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | |
| | Specify: | 8f. | \$0.00 | | | |
| | 8g. Pension or retirement income | <u> </u> | \$0.00 | · <u> </u> | | |
| | 8h. Other monthly income. Specify: | 8h. 🛖 | \$0.00 | | | |
| 9. | Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h | n. 9. | \$400.00 | | | |
| 10. | Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse | 10. | \$5,600.00 | + |]= | \$5,600.00 |
| 11. | State all other regular contributions to the expenses that you list in | | . J. | | | |
| | Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. | | | | | |
| | Do not include any amounts already included in lines 2-10 or amounts t | | . , | expenses list | ed in Sche | |
| | Specify: | | | | 11. + | - \$0.00 |
| 12. | Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, | | | | 12. | \$5,600.00 |
| 12 | if it applies. | a thia farm | .2 | | | Combined monthly income |
| 13. | Do you expect an increase or decrease within the year after you file | e uns iorm | 11 | | | |
| | ✓ No. None. Yes. Explain: | | | | | |
| | | | | | | |

| Del | otor 1 Tyler Allan E | Tyler Allan Ebert | | | | | Case number (if known) | | | |
|-----|---|--|----------|-------|----------|-----------------|------------------------|-------|----------|--|
| 1. | Additional Employers | Debtor | <u>1</u> | | | Debtor 2 or nor | n-filing spouse | | | |
| | Occupation Employer's name Employer's address | Sole Proprietor Forward Finish/Finishline Displays | | | | | | | | |
| | | City | | State | Zip Code | City | | State | Zip Code | |
| | How long employed th | • | 2020 | Otate | Zip Code | | | State | Zip Code | |

| Debtor 1 Tyle | er Allan Ebert | | Case number (if known) | |
|-------------------|-------------------|---------------------------|------------------------|------------|
| 8a. Attached Stat | tement (Debtor 1) | | | |
| | | d/b/a Finishline Displays | | |
| Gross Monthly | Income: | | | \$2,000.00 |
| Expense | | Category | Amount | |
| Tool purchase a | and repairs | Equipment | \$50.00 | |
| Taxes | · | Taxes | \$500.00 | |
| Cost of Goods S | Sold | Cost of Goods Sold | \$800.00 | |
| Shipping | | Shipping | \$100.00 | |
| Utilities | | Utilities | \$50.00 | |
| Subcontractors | | Labor | \$100.00 | |
| Total Monthly E | Expenses | | | \$1,600.00 |
| Net Monthly Inc | come: | | | \$400.00 |

| G | ill in this inform | ation to identify | y your case: | | | Cho | ck if this | 0. | |
|----|---|------------------------|--|------------------|--|---------|----------------------|--------------------------------------|--------------------------|
| | Debtor 1 | Tyler First Name | Allan Middle Name | Ebert Last Na | | | An ame | s. nded filing ement showing p | postpetition |
| | Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Na | me | _ | chapter following | 13 expenses as date: | s of the |
| | United States Bankro | uptcy Court for the: | DISTRICT OF MI | NNESOT | Α | | MM / DE |) / YYYY | _ |
| | Case number (if known) | | | | | | | | |
| O | fficial Form 10 | <u>6J</u> | | | | • | | | |
| S | chedule J: Yo | ur Expenses | 5 | | | | | | 12/15 |
| CO | • | more space is nee | eded, attach another | - | ng together, both an his form. On the top | - | | • | |
| F | Part 1: Descri | be Your Housel | hold | | | | | | |
| 1. | Is this a joint case | ? | | | | | | | |
| | No □ Yes | ebtor 2 live in a sep | • | e, Expenses | s for Separate Househ | nold of | Debtor 2 | | |
| 2. | Do you have depe | ä | No Yes. Fill out this info | rmation | Dependent's relation | | o to | Dependent's | Does dependent |
| | Do not list Debtor 1 Debtor 2. | land 🗀 | for each dependent | | Debtor 1 or Debtor | 2 | | age | live with you? ☐ No |
| | Do not state the de names. | ependents' | | | | | | | Yes No Yes No Yes No Yes |
| | | | | | | | | | No Yes No Yes |
| 3. | Do your expenses expenses of peop yourself and your | le other than | ✓ No ☐ Yes | | | | | | |
| F | Part 2: Estima | te Your Ongoin | ng Monthly Expe | nses | | | | | |
| to | | of a date after the | | - | re using this form as supplemental Sched | | - | - | |
| | | | government assista Schedule I: Your Ind | - | | | | Your expense | es |
| 4. | | | nses for your reside ny rent for the ground | | | | 4 | | \$572.00 |
| | If not included in | line 4: | | | | | | | |
| | 4a. Real estate ta | ixes | | | | | 4 | a | \$261.00 |
| | 4b. Property, hom | neowner's, or renter's | s insurance | | | | 4 | D | \$272.00 |
| | 4c. Home mainter | nance, repair, and u | pkeep expenses | | | | 4 | o | \$750.00 |
| | 4d Homeowner's | association or cond | lominium dues | | | | 4 | 4 | \$290.00 |

| Del | otor 1 Tyler Allan Ebert | Case number (if known) | | | | |
|-----|---|------------------------|---------------|--|--|--|
| | | Your expens | Your expenses | | | |
| 5. | Additional mortgage payments for your residence, such as home equity loans | 5 | | | | |
| 6. | Utilities: | | | | | |
| | 6a. Electricity, heat, natural gas | 6a | \$470.00 | | | |
| | 6b. Water, sewer, garbage collection | 6b | \$100.00 | | | |
| | Telephone, cell phone, Internet, satellite, and cable services | 6c | \$89.00 | | | |
| | 6d. Other. Specify: Cell Phone | 6d | \$50.00 | | | |
| 7. | Food and housekeeping supplies | 7. | \$550.00 | | | |
| 8. | Childcare and children's education costs | 8. | | | | |
| 9. | Clothing, laundry, and dry cleaning | 9. | \$120.00 | | | |
| 10. | Personal care products and services | 10. | \$50.00 | | | |
| 11. | Medical and dental expenses | 11. | \$10.00 | | | |
| 12. | Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | \$1,300.00 | | | |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$100.00 | | | |
| 14. | Charitable contributions and religious donations | 14. | | | | |
| 15. | | | | | | |
| | Do not include insurance deducted from your pay or included in lines 4 or 20. | | | | | |
| | 15a. Life insurance | 15a | \$300.00 | | | |
| | 15b. Health insurance | 15b | \$236.00 | | | |
| | 15c. Vehicle insurance | 15c | \$80.00 | | | |
| | 15d. Other insurance. Specify: | 15d. | | | | |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | 16. | | | | |
| 17 | Specify: Installment or lease payments: | 10. | | | | |
| 17. | 17a. Car payments for Vehicle 1 | 17a. | | | | |
| | | 17a | | | | |
| | 17b. Car payments for Vehicle 2 | | | | | |
| | 17c. Other Specify: | 17c | | | | |
| 40 | 17d. Other. Specify: | 40 | | | | |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | | | | |
| 19. | Other payments you make to support others who do not live with you. | | | | | |
| | Specify: | 19. | | | | |

| Deb | tor 1 | Tyler Allan Ebert | Case number (if known) | |
|-----|----------|---|------------------------|------------|
| 20. | | real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income. | | |
| | 20a. | Mortgages on other property | 20a | |
| | 20b. | Real estate taxes | 20b | |
| | 20c. | Property, homeowner's, or renter's insurance | 20c | _ |
| | 20d. | Maintenance, repair, and upkeep expenses | 20d | _ |
| | 20e. | Homeowner's association or condominium dues | 20e | |
| 21. | Othe | . Specify: | 21. + _ | |
| 22. | Calcu | late your monthly expenses. | | |
| | 22a. | Add lines 4 through 21. | 22a | \$5,600.00 |
| | 22b. | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. | 22b | |
| | 22c. | Add line 22a and 22b. The result is your monthly expenses. | 22c | \$5,600.00 |
| 23. | Calcu | late your monthly net income. | | |
| | 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a | \$5,600.00 |
| | 23b. | Copy your monthly expenses from line 22c above. | 23b. _ _ | \$5,600.00 |
| | 23c. | Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c | \$0.00 |
| 24. | Do yo | ou expect an increase or decrease in your expenses within the year after you f | ile this form? | |
| | | xample, do you expect to finish paying for your car loan within the year or do you exent to increase or decrease because of a modification to the terms of your mortgag | | |
| | | No. | | |
| | V | Yes. Explain here: See continuation sheet. | | |
| | | | | |
| | | | | |

| Debtor 1 | Tyler Allan Ebert | Case number (if known) | |
|----------|-------------------|------------------------|--|
| | | | |

24. Expected increase or decrease in expenses within the year after you file this form:

\$18,000 worth of repairs are needed on the condo within the next 2 years, which are required to fix by Association Bylaws, inluding ceiling, plumbing, and foundation. This is reflected in budget.

Debtor is required to drive from MN to WI for his job. He put 53,000 miles on his vehicle in the last 12 months. As his vehicle is older, he also has repair needs. He does not currently take separate reimbursement for residence in WI or mileage.

| Debtor 1 | Tyler | Allan | Ebert | | |
|-------------------------------|----------------------------------|---------------------------------------|---|---|------------------------------------|
| Debtor 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filin | g) First Name | Middle Name | Last Name | | |
| United States E | Bankruptcy Court fo | or the: DISTRICT OF | MINNESOTA | | |
| Case number (if known) | | | | ☐ Check if th amended f | |
| Official For | m 106Sum | | | | |
| Summary | of Your Ass | ets and Liabilit | ies and Certain | Statistical Information | 12/1 |
| | you file your orig | , , , , , , , , , , , , , , , , , , , | till out a new Summary : | and check the box at the top of this page | |
| . Schedule A | /B: Property (Offici | ial Form 1064/B) | | | our assets alue of what you own |
| | | ŕ | /B | | \$157,600.00 |
| та. Обрут | ino oo, rotarroare | state, nom concadio 70 | , 5 | _ | |
| 1b. Copy I | ine 62, Total perso | nal property, from Sche | edule A/B | | \$78,496.46 |
| 1c. Copy I | ine 63, Total of all | property on Schedule A | /В | | \$236,096.46 |
| Part 2: S | ummarize You | ır Liabilities | | | |
| | | | | | Your liabilities Amount you owe |
| | | • | Property (Official Form 1 f claim, at the bottom of the | 106D) he last page of Part 1 of Schedule D | \$950,329.73 |
| | | | s (Official Form 106E/F) ured claims) from line 6e | of Schedule E/F | \$0.00 |
| 3b. Copy t | he total claims fror | m Part 2 (nonpriority un | secured claims) from line | 6j of Schedule E/F+ | \$432,385.66 |
| | | | | Your total liabilities | \$1,382,715.39 |
| | | | | | |
| Part 3: S | Summarize You | ır Income and Exp | enses | | |
| | Summarize You Your Income (Offi | - | enses | | |

Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....

\$5,600.00

| Deb | tor 1 | Tyler Allan Ebert Case | e numb | er (if known) | |
|---|-----------|--|------------|-------------------------|---------------------|
| Pa | art 4: | Answer These Questions for Administrative and Statistical | Recor | ds | |
| 6. | Are you | ı filing for bankruptcy under Chapters 7, 11, or 13? | | | |
| | □ No ✓ Ye | . You have nothing to report on this part of the form. Check this box and submit s | t this for | rm to the court with yo | ur other schedules. |
| 7. | What ki | nd of debt do you have? | | | |
| | far Yo | our debts are primarily consumer debts. Consumer debts are those "incurred nily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical our debts are not primarily consumer debts. You have nothing to report on this is form to the court with your other schedules. | purpos | es. 28 U.S.C. § 159. | • |
| 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | | | | | |
| 9. | Copy th | ne following special categories of claims from Part 4, line 6 of Schedule E/F | <u>;</u> | | |
| | | | | Total claim | |
| | From P | art 4 on Schedule E/F, copy the following: | | | |
| | 9a. Do | mestic support obligations. (Copy line 6a.) | | | _ |
| | 9b. Ta | xes and certain other debts you owe the government. (Copy line 6b.) | | | _ |
| | 9c. Cla | aims for death or personal injury while you were intoxicated. (Copy line 6c.) | | | _ |
| | 9d. Stu | udent loans. (Copy line 6f.) | | | _ |
| | | oligations arising out of a separation agreement or divorce that you did not report ority claims. (Copy line 6g.) | as | | _ |
| | 9f. De | bts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | 4 | + | _ |

9g. Total. Add lines 9a through 9f.

| Fill in this inf | ormation to i | dentify your case: | : | |
|---------------------------------|--------------------|-----------------------------|-------------------------|--|
| Debtor 1 | Tyler | Allan | Ebert | |
| Dalitano | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | — |
| United States Bar | nkruptcy Court fo | r the: DISTRICT OF I | MINNESOTA | |
| Case number (if known) | | | | Check if this is an amended filing |
| Official Form | 106Dec | | | |
| Declaration | About an I | ndividual Debt | or's Schedules | 12/15 |
| If two married nec | onle are filing to | nother both are equal | ly responsible for supr | olying correct information. |
| • | | • | | . • |
| | | | | chedules. Making a false statement, ith a bankruptcy case can result in fines up to |
| \$250,000, or impri | sonment for up | to 20 years, or both. | 18 U.S.C. §§ 152, 1341, | 1519, and 3571. |
| | | | | |
| Sig | n Below | | | |
| Did you pay o | or agree to pay s | someone who is NOT | an attorney to help you | fill out bankruptcy forms? |
| ☑ No | | | | |
| ☐ Yes. Na | ame of person | | | Attach Bankruptcy Petition Preparer's Notice, |

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

| X /s/ Tyler Allan Ebert | x |
|--|-----------------------|
| Tyler Allan Ebert, Debtor 1 | Signature of Debtor 2 |
| Date <u>01/14/2021</u> MM / DD / YYYY | Date MM / DD / YYYY |

Declaration, and Signature (Official Form 119).

| Fill in this inf | | | | | |
|---|---|--|---|--|------|
| Debtor 1 | Tyler | dentify your case Allan | Ebert | | |
| Debior 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Ba | nkruptcy Court fo | or the: DISTRICT OF | MINNESOTA | | |
| Case number | | | | _ | |
| (if known) | | | | Check if this is an amended filing | |
| Official Form | 107 | | | | |
| | | Affaire for Ind | ividuals Filing for B | ankruntov | 04/1 |
| | | | al manula and fillian to mathem b | ooth are equally responsible for supplying | |
| correct information | on. If more spac | | separate sheet to this form. C | on the top of any additional pages, write | |
| Part 1: Giv | ve Details Ab | out Your Marital S | Status and Where You Li | ved Before | |
| | | | | .04 20.0.0 | |
| | current marital | status? | | | |
| I. What is your | current marital | status? | | | |
| I. What is your ☐ Married ☑ Not marrie ☐ During the la | current marital | | ther than where you live now | | |
| Mhat is your ☐ Married ☑ Not marrie During the la ☑ No | current marital ed sst 3 years, have | you lived anywhere o | | ? | |
| Mhat is your Married Not marrie During the la Yes. List Within the las (Community p | current marital ed ast 3 years, have all of the places st 8 years, did ye | you lived anywhere of you lived in the last 3 you ever live with a spo | other than where you live now ears. Do not include where you ouse or legal equivalent in a co | ? | |

| Debtor 1 | Tyler Allan Ebert | | Case nur | mber (if known) | | | | | |
|-------------------------------------|--|--|---|--|--|--|--|--|--|
| Part 2: | Explain the Sources of Y | our Income | | | | | | | |
| Fill in t | ou have any income from employn the total amount of income you rece are filing a joint case and you have | ived from all jobs and all bu | sinesses, including part | t-time activities. | lendar years? | | | | |
| □ No ☑ Ye | es. Fill in the details. | | | | | | | | |
| | | Debtor 1 | | Debtor 2 | | | | | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions | Sources of income Check all that apply. | Gross income (before deductions and exclusions | | | | |
| | ary 1 of the current year until | ✓ Wages, commissions, bonuses, tips | \$3,000.00 | Wages, commissions, bonuses, tips | | | | | |
| ine date ye | a mea for Samulaptoy. | Operating a business | | Operating a business | | | | | |
| | t calendar year: | ✓ Wages, commissions, bonuses, tips | \$59,906.75 | Wages, commissions, bonuses, tips | | | | | |
| (January 1 | to December 31, 2020) | Operating a business | | Operating a business | | | | | |
| For the cal | endar year before that: | ✓ Wages, commissions, bonuses, tips | \$6,502.00 | Wages, commissions, bonuses, tips | | | | | |
| January 1 | to December 31, 2019) | Operating a business | | Operating a business | | | | | |
| Include unemp and ga Debtoo List ea | Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. | | | | | | | | |

| Del | otor 1 | Tyler Allan Ebert Case number (if known) |
|-----|----------------------------------|--|
| P | art 3: | List Certain Payments You Made Before You Filed for Bankruptcy |
| 6. | Are eith | ner Debtor 1's or Debtor 2's debts primarily consumer debts? |
| | ☑ No. | Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." |
| | | During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more? |
| | | ✓ No. Go to line 7. |
| | | Yes. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. |
| | | * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. |
| | ☐ Yes | Debtor 1 or Debtor 2 or both have primarily consumer debts. |
| | | During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? |
| | | □ No. Go to line 7. |
| | | Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. |
| 7. | Insiders corpora agent, in | I year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; tions of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations child support and alimony. |
| | ✓ No ☐ Yes | . List all payments to an insider. |
| В. | benefite | I year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that ed an insider? payments on debts guaranteed or cosigned by an insider. |
| | Include ✓ No | payments on debts guaranteed of cosigned by an insider. |
| | Yes | . List all payments that benefited an insider. |
| P | art 4: | Identify Legal Actions, Repossessions, and Foreclosures |
| 9. | List all s | I year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody ations, and contract disputes. |
| | ✓ No ☐ Yes | . Fill in the details. |

| Deb | tor 1 | Tyler Allan Ebert | Case number (if known) |
|-----|---------------|--|---|
| 10. | seized, | 1 year before you filed for bankruptcy, was any of your property report, or levied? all that apply and fill in the details below. | ossessed, foreclosed, garnished, attached, |
| | | o. Go to line 11. es. Fill in the information below. | |
| 11. | | 90 days before you filed for bankruptcy, did any creditor, including ants from your accounts or refuse to make a payment because you own | |
| | ✓ No | es. Fill in the details. | |
| 12. | | 1 year before you filed for bankruptcy, was any of your property in thors, a court-appointed receiver, a custodian, or another official? | ne possession of an assignee for the benefit of |
| | ✓ No | | |
| P | art 5: | List Certain Gifts and Contributions | |
| 13. | Within | 2 years before you filed for bankruptcy, did you give any gifts with a | total value of more than \$600 per person? |
| | ✓ No ☐ Yes | es. Fill in the details for each gift. | |
| 14. | | 2 years before you filed for bankruptcy, did you give any gifts or concharity? | tributions with a total value of more than \$600 |
| | ✓ No ☐ Yes | es. Fill in the details for each gift or contribution. | |
| Pa | art 6: | List Certain Losses | |
| 15. | | 1 year before you filed for bankruptcy or since you filed for bankrupt disaster, or gambling? | cy, did you lose anything because of theft, fire, |
| | ✓ No ☐ Yes | es. Fill in the details. | |

| Debtor 1 Tyler Allan Ebert | | | | | Case number (if k | nown) | |
|----------------------------|--------------------------------------|------------------------|-----------------------------------|---|----------------------|--|-------------------|
| Part 7: | List Cert | tain P | ayments or | Transfers | | | |
| anyo | ne you consult | ted abo | ut seeking bar | ptcy, did you or anyone else acting on nkruptcy or preparing a bankruptcy pe preparers, or credit counseling agencies | etition? | | |
| □ ¹ | No Yes. Fill in the d | | apicy pouton p | reparets, or creat countriesing agentics | ioi sorvicos roquii | od for your burninght. | , |
| | & Walker Law | Office | s, PLLC | Description and value of any proper \$15 for credit counseling | ty transferred | Date payment or transfer was made | Amount of payment |
| | Street | | | - | | | \$5,662.00 |
| Minneap City | oolis | MN State | 55409 ZIP Code | - | | | |
| Email or we | bsite address | | | - | | | |
| anyo Do no ☑ N | one who promis | ed to h ayment | elp you deal w | ptcy, did you or anyone else acting on vith your creditors or to make paymen you listed on line 16. | | | erty to |
| prop Inclu | erty transferred de both outright | d in the transfe | ordinary cour rs and transfers | uptcy, did you sell, trade, or otherwise se of your business or financial affairs s made as security (such as granting of a nave already listed on this statement. | s? | | |
| | No Yes. Fill in the d | letails. | | | | | |
| | ge House, LLO o Received Transfe | | | Description and value of any property transferred condominum located at him , Minneapolis, | | roperty or payments ts paid in exchange | |
| Number | Street | | | MN 55416 | | | I |
| City Person's r | relationship to yo | State ou LLC | ZIP Code | - | | | |
| you a | are a beneficia | | | ruptcy, did you transfer any property to called asset-protection devices.) | to a self-settled tr | ust or similar device | e of which |
| _ | No Yes. Fill in the d | letails. | | | | | |

| Debtor 1 | | Tyler Allan Ebert | | Case number (if known) | Case number (if known) | |
|--|------------|--|--|---|------------------------|--|
| P | art 8: | List Certain Fina | ncial Accounts, Instruments, Safe De | eposit Boxes, and Storage Uni | ts | |
| benefit, closed, sold, moved, or tran- Include checking, savings, money mar | | t, closed, sold, moved, one checking, savings, mon | for bankruptcy, were any financial accounts or transferred? ey market, or other financial accounts; certificate atives, associations, and other financial institutio | es of deposit; shares in banks, credit un | | |
| | ✓ No Ye | s. Fill in the details. | | | | |
| 21. | | u now have, or did you l curities, cash, or other v | have within 1 year before you filed for bankru valuables? | ptcy, any safe deposit box or other d | epository | |
| | ✓ No Ye | s. Fill in the details. | | | | |
| 22. | ☐ No | | storage unit or place other than your home v | vithin 1 year before you filed for bank | ruptcy? | |
| | | | Who else has or had access to it? | Describe the contents | Do you still have it? | |
| UHaul Storage Center Name of Storage Facility | | rage Center age Facility | Name | Basic household items | □ No ☑ Yes | |
| Num | iber St | reet | Number Street | _ | | |
| | | | | <u> </u> | | |
| City | | State ZIP Cod | City State ZIP Code Who else has or had access to it? | Describe the contents | Do you still have it? | |
| Extra Storage Name of Storage Facility | | | Name | Basic household items | ✓ No □ Yes | |
| Num | iber St | er Street Number Street | | | | |
| | | | | _ | | |
| UJIN | | State 7IP Cod | te City State 7ID Code | | | |

| Debt | Part 9: Identify Property You Hold or Control for Someone Else | | | | | Case number (if known) | | |
|--------------------------|---|--|---|---|--|---|------------|--|
| Pa | | | | | | e | | |
| | • | u hold or control any propert d in trust for someone. | y that someone else | owns? I | nclude any p | property you borrowed from, are stor | ing for, | |
| | □ No ☑ Ye | s. Fill in the details. | | | | | | |
| | | | Where is the prop | erty? | | Describe the property | Value | |
| Pare Owne | ents r's Name | e | _ | | | some furniture and tools | \$1,000.00 | |
| Numb | | reet | Number Street | _ | | _ | | |
| | | | | | | _ | | |
| | | | Minneapolis | MN | 55416 | _ | | |
| City | | State ZIP Code | City | State | ZIP Code | | | |
| Pa | rt 10: | Give Details About E | nvironmental Inf | ormatic | n | | | |
| in S ut H st | ite mea tilize it azardo ubstan | g statutes or regulations col ans any location, facility, or or used to own, operate, or | ntrolling the cleanup property as defined u utilize it, including di gan environmental la utant, contaminant, c | of these under any sposal si w defines | substances, v environmentes. s as a hazard item. | ntal law, whether you now own, oper | ate, or | |
| | Has an law? | ny governmental unit notified | l you that you may be | e liable o | potentially l | liable under or in violation of an envi | ronmental | |
| | ✓ No | s. Fill in the details. | | | | | | |
| | 5. Have you notified any governmental unit of any release of hazardous material? ✓ No ✓ Yes. Fill in the details. | | | | | | | |
| | _ | ou been a party in any judic | ial or administrative | proceedii | ng under any | environmental law? Include settler | nents and | |
| | ✓ No | s. Fill in the details. | | | | | | |

Part 11:

Give Details About Your Business or Connections to Any Business

| 27. Within 4 years before you filed for ba business? | nkruptcy, did you own a business or have an | y of the following connections to any | | |
|---|--|---|--|--|
| ✓ A member of a limited liability✓ A partner in a partnership✓ An officer, director, or managir | yed in a trade, profession, or other activity, either company (LLC) or limited liability partnership (Ling executive of a corporation voting or equity securities of a corporation | | | |
| No. None of the above applies. Ge✓ Yes. Check all that apply above an | o to Part 12. In the details below for each business. | | | |
| Forward Finish d/b/a Finishline Displ Business Name | Describe the nature of the business sole proprietorship sale of displays, workworking, painting, metal work, and solvent | Employer Identification number Do not include Social Security number or ITIN. EIN: — | | |
| Minneapolis MN 55416 | recycling Name of accountant or bookkeeper | Dates business existed From 2020 To current | | |
| Thiede Legacy, LLC Business Name Number Street | Describe the nature of the business WI based LLC Factory finishing services for window and door companies, primarily standard colors Name of accountant or bookkeeper | Employer Identification number Do not include Social Security number or ITIN. EIN: | | |
| City State ZIP Code | | From October 2019 To current | | |
| Hermitage House, LLC Business Name Number Street | Describe the nature of the business held the debtor's personal condominium in title for a short time (currently titled to the debtor) no other assets or business | Employer Identification number Do not include Social Security number or ITIN. | | |
| | Name of accountant or bookkeeper | Dates business existed From To | | |
| City State ZIP Code Finish Line Financial & Leasing, LLC Business Name Number Street | Describe the nature of the business business has never operated, exists in name only Name of accountant or bookkeeper | Employer Identification number Do not include Social Security number or ITIN EIN: | | |
| | | Prom To | | |
| City State ZIP Code | | | | |

| | Tyler Allan Ebert | Case number (if known) | | | | |
|---|--|---|---|--|--|--|
| Forward | Wine, LLC | Describe the nature of the business business has never operated, exists | Employer Identification number Do not include Social Security number or ITIN. | | | |
| Business Name | | in name only | EIN: – | | | |
| Number | Street | Name of accountant or bookkeeper | | | | |
| Number | Sireei | | Dates business existed | | | |
| | | _ | From To | | | |
| City | State ZIP Code | _ | | | | |
| | in 2 years before you filed for nancial institutions, creditors, | bankruptcy, did you give a financial statement or other parties. | to anyone about your business? Include | | | |
| ☑ 1 | No | | | | | |
| □ / | es. Fill in the details below. | | | | | |
| Part 12 | 2: Sign Below | | | | | |
| | | ent of Financial Affairs and any attachments, a derstand that making a false statement, conce | | | | |
| that answ property or both. | rers are true and correct. I un by fraud in connection with a 18 U.S.C. §§ 152, 1341, 1519, a | derstand that making a false statement, conce bankruptcy case can result in fines up to \$250 and 3571. | aling property, or obtaining money or | | | |
| that answ property or both. | rers are true and correct. I un by fraud in connection with a | derstand that making a false statement, conce bankruptcy case can result in fines up to \$250 | aling property, or obtaining money or | | | |
| that answ property or both. | rers are true and correct. I un by fraud in connection with a 18 U.S.C. §§ 152, 1341, 1519, a ler Allan Ebert | derstand that making a false statement, conce bankruptcy case can result in fines up to \$250 and 3571. X | aling property, or obtaining money or | | | |
| that answ property or both. X /s/ Ty/ Tyler A Date | ters are true and correct. I un by fraud in connection with a 18 U.S.C. §§ 152, 1341, 1519, a ler Allan Ebert Illan Ebert, Debtor 1 | derstand that making a false statement, conce bankruptcy case can result in fines up to \$250 and 3571. X Signature of Debtor 2 | aling property, or obtaining money or ,000, or imprisonment for up to 20 years, | | | |
| that answ property or both. X /s/ Ty Tyler A Date Did you a | ters are true and correct. I un by fraud in connection with a 18 U.S.C. §§ 152, 1341, 1519, a ler Allan Ebert Illan Ebert, Debtor 1 | derstand that making a false statement, conce bankruptcy case can result in fines up to \$250 and 3571. X Signature of Debtor 2 Date | aling property, or obtaining money or ,000, or imprisonment for up to 20 years, | | | |
| that answ property or both. X /s/ Ty/ Tyler A Date | ters are true and correct. I un by fraud in connection with a 18 U.S.C. §§ 152, 1341, 1519, a ler Allan Ebert Illan Ebert, Debtor 1 | derstand that making a false statement, conce bankruptcy case can result in fines up to \$250 and 3571. X Signature of Debtor 2 Date | aling property, or obtaining money or ,000, or imprisonment for up to 20 years, | | | |
| X /s/ Ty/ Tyler A Date Did you a | ters are true and correct. I un by fraud in connection with a 18 U.S.C. §§ 152, 1341, 1519, a ler Allan Ebert Illan Ebert, Debtor 1 01/14/2021 ttach additional pages to You | derstand that making a false statement, conce bankruptcy case can result in fines up to \$250 and 3571. X Signature of Debtor 2 Date | aling property, or obtaining money or ,000, or imprisonment for up to 20 years, Filing for Bankruptcy (Official Form 107)? | | | |
| that answ property or both. X /s/ Ty/ Tyler A Date Did you a No Yes Did you p | ters are true and correct. I un by fraud in connection with a 18 U.S.C. §§ 152, 1341, 1519, a ler Allan Ebert Illan Ebert, Debtor 1 01/14/2021 ttach additional pages to You | derstand that making a false statement, conce bankruptcy case can result in fines up to \$250 and 3571. X Signature of Debtor 2 Date The statement of Financial Affairs for Individuals | aling property, or obtaining money or ,000, or imprisonment for up to 20 years, Filing for Bankruptcy (Official Form 107)? | | | |

| Fill in this in | formation to | dentify your case | : | | | | |
|--------------------------------|--|--|---------------------|------------------------------|--|--------------|---|
| Debtor 1 | Tyler | Allan | Ebert | | | | |
| | First Name | Middle Name | Last Nam | е | | | |
| Debtor 2 (Spouse, if filing | g) First Name | Middle Name | Last Nam | e | | | |
| United States B | ankruntey Court fo | or the: DISTRICT OF | MINNESOT | Δ | | | |
| | ankruptcy Court it | or the. District St | MINITEGOT | | | | |
| (if known) | | | | | | | Check if this is an amended filing |
| | | | | | _ | | |
| Official Forn | n 108 | | | | | | |
| Statement | of Intention | for Individuals | Filing L | Inder Chap | ter 7 | | 12/15 |
| If you are an ind | ividual filing und | er chapter 7, you mus | t fill out this | form if: | | | |
| • | J | by your property, or | t iiii out tiiis | ionii ii. | | | |
| | | | .! | | | | |
| · | | perty and the lease ha | • | | | | |
| | chever is earlier, | - | | | petition or by the date must also send copies | | _ |
| • | eople are filing to ust sign and date | | both are equ | ually responsible | for supplying correct | information | on. |
| | _ | | | | to all and to this form | 0 11 1 | |
| - | | oossible. If more space e and case number (if | | attach a separat | te sheet to this form. | On the top | or any |
| | - | | | | | | |
| Part 1: Li | st Your Credi | tors Who Hold Sec | cured Clai | ms | | | |
| | ditors that you lis | sted in Part 1 of Sched | dule D: Credi | tors Who Hold C | laims Secured by Pro | perty (Offi | cial Form 106D), |
| Identify the | creditor and the | property that is collate | | /hat do you inten | | - | u claim the property npt on Schedule C? |
| Creditor's name: | Northpoint | Bank | [| Surrender the Retain the pro | property. perty and redeem it. | □ No | |
| Description (| of Homestead | at | _ | Retain the pro | perty and enter into a | ш | |
| property securing del | Minneapolis | | , [| Reaffirmation Retain the pro | Agreement. perty and [explain]: | | |
| | | | | | | | |
| Part 2: Li | st Your Unex | oired Personal Pro | perty Lea | ses | | | |
| fill in the informa | ation below. Do i | not list real estate leas | ses. <i>Unexpir</i> | ed leases are lea | Contracts and Unexp ses that are still in eff es not assume it. 11 L | ect; the lea | = |
| Describe yo | our unexpired per | sonal property leases | . | | | Will this | lease be assumed? |
| Lessor's nar | | eedle Properties, L | | | | | |
| Description of | | e Legacy, LLC renta | | | | ✓ No Yes | |

| Debtor 1 | Tyler Allan Ebert | | Case number (if known) |
|----------|---|-----|---|
| Part 3: | Sign Below | | |
| - | enalty of perjury, I declare that I have indicated my intention about any Il property that is subject to an unexpired lease. | | ed my intention about any property of my estate that secures a debt and se. |
| | er Allan Ebert lan Ebert, Debtor 1 | _ x | Signature of Debtor 2 |
| _ | 1/14/2021 MM / DD / YYYY | | Date MM / DD / YYYY |

UNITED STATES BANKRUPTCY COURT DISTRICT OF MINNESOTA MINNEAPOLIS DIVISION

IN RE: Tyler Allan Ebert CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

| | The above named Debtor her | eby verifies that t | he attached list of | f creditors is true a | and correct to the | best of his/her |
|------|----------------------------|---------------------|---------------------|-----------------------|--------------------|-----------------|
| know | ledge. | | | | | |

| Date 1/14/2021 | Signature /s/ Tyler Allan Ebert Tyler Allan Ebert |
|----------------|---|
| Date | Signature |

Advanced Auto Parts 302 S 5th St Medford, WI 54451

Amazon/Synchrony Bank Attn Bankrutpcy Dept PO Box 103104 Roswell GA 30076

Capital One Bankruptcy PO Box 30253 Salt Lake City UT 84130 3285

Internal Revenue Service PO Box 7346 Philadelphia PA 19101-7346

Medford Area Development Foundation PO Box 172 Medford, WI 54451

Menards/Capital One PO Box 30257 Salt Lake City UT 84130

Minnesota Department of Revenue 551 Bkcy Section PO Box 64447 St Paul MN 55164

Nicolet National Bank SBA Paycheck Protection Program Loan 111 N Washington St Green Bay, WI 54301

Nicolet National Bank 111 N Washington St Green Bay, WI 54301 Northpoint Bank 3333 Deposit Dr NE Loan Servicing, Suite 320 Grand Rapids, MI 49546

Northwest Regional Planning Commission 1400 South River St Spooner, WI 54801

Northwest WI Business Development Corp. 1400 South River St Spooner, WI 54801

Office Depot PO Box 653054 Dallas TX 75265

PineNeedle Properties, LLC



Sams Club/Synchrony Bank Attn: Bankruptcy Dept PO Box 965060 Orlando FL 32896-5060

The Home Depot/CBNA PO Box 6497 Sioux Falls, SD 57117-6497

WI Business Innovation Corp. 1400 South River St Spooner, WI 54801



Wisconsin Department of Revenue PO Box 8906 Madison WI 53708

| | ill in this | information to | identify your case | : | | |
|---|---------------------------|--|---|---|---|--|
| De | ebtor 1 | Tyler | Allan | Ebert | | |
| | | First Name | Middle Name | Last Name | | |
| | ebtor 2 pouse, if fili | ng) First Name | Middle Name | Last Name | | |
| Ur | nited States | Bankruptcy Court t | for the: DISTRICT OF | MINNESOTA | | |
| | | | or the. <u>Diolitical or</u> | | | |
| | ase number known) | | | | Charle if this is an amended filling | |
| | | | | | Check if this is an amended filing | |
| Of | ficial Fo | rm 122A-1Sເ | ınn | | | |
| | | | | nntion of Abusa | 1 Under \$ 707/b\/2\ | |
| Sta | atemen | t of Exempti | on from Presur | nption of Abuse | e Under § 707(b)(2) 12/15 | |
| that filin | you are ex g together, | cempted from a pr and any of the ex | esumption of abuse. E clusions in this statem | Be as complete and acc | hly Income (Official Form 122A-1), if you believe curate as possible. If two married people are e of you, the other person should complete a (2)(C). | |
| P | art 1: | Identify the Kir | nd of Debts You Ha | ave | | |
| 1. | personal, f | family or household | | hat your answer is consis | n 11 U.S.C. § 101(8) as "incurred by an individual primarily for a stent with the answer you gave at line 16 of the Voluntary | |
| | ☑ No. | | -1; on the top of page 1 ement with the signed Fo | | 1, There is no presumption of abuse, and sign Part 3. Then | |
| | Yes. | Go to Part 2. | | | | |
| Đ | art 2: | Determine Whe | ather Military Servi | ice Provisions Appl | ly to You | |
| | | | • | • | 19 10 100 | |
| 2. | | | (as defined in 38 U.S.C | s. § 3741(1))? | | |
| | No. | Go to line 3. | to mostly while you were | on active duty or while y | you were performing a homeland defence estivity? | |
| | Yes. | • | ts mostly while you were l)(1); 32 U.S.C. § 901(1) | | you were performing a homeland defense activity? | |
| | | ☐ No. Go to | line 3. | | | |
| | | _ | | o of page 1 of that form, owith the signed Form 122 | check box 1, <i>There is no presumption of abuse,</i> and sign Part 3 2A-1. | |
| 3. | Are you o | r have you been a | Reservist or member | of the National Guard? | | |
| | □ No. | Complete Form 1 | 22A-1. Do not submit th | nis supplement. | | |
| | Yes. | Were you called t | o active duty or did you | perform a homeland defe | ense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1) | |
| | | No. Complete Fo | orm 122A-1. Do not sub | mit this supplement. | | |
| | | Yes. Check any o | ne of the following cated | gories that applies: | | |
| | | | o active duty after Sept days and remain on acti | | If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check | |
| I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on which is fewer than 540 days before I file this bankruptcy case. box 3, The Means Test does not apply now and sign Part 3. Then submit this supplement with the sign of 122A-1. You are not required to fill out the rest of 0 Form 122A-1 during the exclusion period. The exclusion period. | | | | | | |
| | | ☐ I am performi least 90 days | ng a homeland defens | e activity for at | period means the time you are on active duty or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii). | |
| | | ☐ I performed a | homeland defense act | tivity for at | If your exclusion period ends before your case is closed, | |

_, which is

least 90 days, ending on _____, which is fewer than 540 days before I file this bankruptcy case.

you may have to file an amended form later.

| Ī | ill in tl | his info | rmation to iden | | | | x only as direc orm 122A-1Sup | |
|---------------------------|--|---|--|--|--|---|---|--|
| D | ebtor 1 | | Tyler First Name | Allan Middle Name | Ebert Last Name | _ | resumption of abuse | |
| U (S | | ates Banl | First Name kruptcy Court for the | Middle Name | Last Name MINNESOTA | 2. The calculation of abuse apple Means Test C | on to determine if a ies will be made un alculation (Official l est does not apply r ilitary service but it | presumption der Chapter 7 Form 122A-2). now because |
| _ | f known) | | | | | later. | ilitary sorvice but it | codia appry |
| _ | | | | | | Check if this is | an amended filing | |
| Of | ficial | Form | 122A-1 | | | | | |
| _ | | | | our Current | Monthly Income | | | 04/20 |
| info are mil 122 | curate. ormation exempo itary se | If more s n applies ted from rvice, co pp) with t | pace is needed, att On the top of any a presumption of a | ach a separate si additional pages buse because yo tement of Exempt | ed people are filing togeth heet to this form. Include s, write your name and cas ou do not have primarily co tion from Presumption of a | the line number to whicl se number (if known). If onsumer debts or becau | h the additional you believe that y se of qualifying | ou |
| 1. | What | is vour m | narital and filing sta | itus? Check one o | only | | | |
| | What is your marital and filing status? Check one only. | | | | | | | |
| | Not married. Fill out Column A, lines 2-11. | | | | | | | |
| | Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. | | | | | | | |
| | Married and your spouse is NOT filing with you. You and your spouse are: | | | | | | | |
| | Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you | | | | | | | - h |
| | [| decla | re under penalty of p | perjury that you an | d. Fill out Column A, lines 2 d your spouse are legally so s that do not include evadin | eparated under nonbankru | iptcy law that applie | s or that you |
| | Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. | | | | | | | |
| | | | | | | Debtor 1 De | lumn B btor 2 or n-filing spouse | |
| 2. | | | ges, salary, tips, bo oll deductions). | onuses, overtime | , and commissions | | | |
| 3. | | ny and n ımn B is f | | nts. Do not includ | de payments from a spouse | | | |
| 4. | expen regula your d | ses of your contribute on the contribute of the contribute on the | itions from an unmai ts, parents, and roon | ents, including ch rried partner, mem nmates. Include re | paid for household ild support. Include bers of your household, egular contributions from ude payments you listed | | | |

| Del | otor 1 Tyler Allan Ebert | | | с | ase number (if | known) |
|-----|---|-----------------|-----------|--------|--------------------|---|
| | | | | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse |
| 5. | Net income from operating a busine | ess, profession | , or farm | | | |
| | | Debtor 1 | Debtor 2 | | | |
| | Gross receipts (before all deductions) | | | - | | |
| | Ordinary and necessary operating — expenses | · | | Сору | | |
| | Net monthly income from a business, profession, or farm | | | | | |
| 6. | Net income from rental and other re | al property | | | | |
| | | Debtor 1 | Debtor 2 | | | |
| | Gross receipts (before all deductions) | | | - | | |
| | Ordinary and necessary operating — expenses | • | | Сору | | |
| | Net monthly income from rental or other real property | | | here → | | |
| 7. | Interest, dividends, and royalties | | | | | |
| 8. | Unemployment compensation | | | | | <u> </u> |
| | Do not enter the amount if you content benefit under the Social Security Act. | | | | | |
| | For you | | | | | |
| | For your spouse | | | | | |
| 9. | Pension or retirement income. Do n | • | | t | | |

next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

| Deb | otor 1 | Ту | ler Allan Ebert | Case number (if known) | | | |
|-----|---|--|---|--|--------------------|--------------------------------------|-----------------|
| | | | | | Column A Debtor 1 | Column B Debtor 2 or non-filing spo | use |
| 10. | amou paymo declar (50 U (COV huma pay, a conne memb | int. D ents red by S.C. ID-19 unity, c annuit ection ber of | on all other sources not listed above on the include any benefits received unmade under the Federal law relating to the President under the National Emeration of the seq.) with respect to the coron programments received as a victim of a vor international or domestic terrorism; or allowance paid by the United State with a disability, combat-related injury the uniformed services. If necessary, age and put the total below. | nder the Social Security Act; the national emergency ergencies Act navirus disease 2019 war crime, a crime against or compensation, pension, tes Government in or or disability, or death of a | | | |
| 11. | Calcu Add li | ulate y | ints from separate pages, if any. your total current monthly income. through 10 for each column. he total for Column A to the total for Co | olumn B. | + | + | Total current |
| Ρ | art 2: | [| Determine Whether the Means | s Test Applies to You | | | monthly income |
| 12. | Calcu | | your current monthly income for the | | | | |
| | 12a. | Cop | y your total current monthly income fro | om line 11 | Сору | line 11 here | 12a. |
| | | Mult | iply by 12 (the number of months in a y | year). | | | X 12 |
| | 12b. | The | result is your annual income for this pa | art of the form. | | | 12b |
| 13. | Calcu | ulate t | the median family income that applie | es to you. Follow these steps: | | | |
| | Fill in | the s | tate in which you live. | | | | |
| | Fill in | the n | umber of people in your household. | | | | |
| | Fill in | the m | nedian family income for your state and | d size of household | | | 13. |
| | | | st of applicable median income amoun s for this form. This list may also be av | | | e | |
| 14. | How | do th | e lines compare? | | | | |
| | 14a. | | Line 12b is less than or equal to line 3 Go to Part 3. Do NOT fill out or file O | | ox 1, There is no | presumption of abo | use. |
| | 14b. | | Line 12b is more than line 13. On the Go to Part 3 and fill out Form 122A-2. | | presumption of al | buse is determined | by Form 122A-2. |

| Debtor 1 | Tyler Allan Ebert | Case number (if known) | | | | |
|--|----------------------------|------------------------|--|--|--|--|
| Part 3: | Sign Below | | | | | |
| By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. | | | | | | |
| | | | | | | |
| X /s | s/ Tyler Allan Ebert | , | | | | |
| T | yler Allan Ebert, Debtor 1 | Signature of Debtor 2 | | | | |
| | | | | | | |
| D | ate 1/14/2021 | Date | | | | |
| | MM / DD / YYYY | MM / DD / YYYY | | | | |

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.